



Commissioner for Patents
Washington, DC 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4687

SERIAL NUMBER 09/541,986	FILING DATE 04/03/2000 RULE	CLASS 482	GROUP ART UNIT 3764	ATTORNEY DOCKET NO. EX-2DC4
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APPLICANTS

Shea Michael, Vienna, VA;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ****

** 06/06/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	VA	9	5	1
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

Michael J Shea
1726 Creek Crossing Road
Vienna ,VA 22182

TITLE

METHOD OF DISPLAYING ADVERTISEMENTS TO AN EXERCISER

FILING FEE RECEIVED 696	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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APPLICANTS

Shea Michael, Vienna, VA;

**** CONTINUING DATA *******
 THIS APPN IS A CON OF 09/317,980 5/25/1999

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ******** 06/06/2000**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY VA	SHEETS DRAWING 9	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Signature _____ Initials _____					

ADDRESS
 Michael J Shea
 1726 Creek Crossing Road
 Vienna , VA
 22182
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EXERCISE APPARATUS

FILING FEE RECEIVED 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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